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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/800,448			ing Date 05/2001	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY
FOR N			UMBER FIL	.ED NUI	MBER EXTRA	Г	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A		1	N/A	
	SEARCH FEE (37 CFR 1.16(k), (f),		N/A		N/A		N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),	E or (q))	N/A		N/A		N/A			N/A	
	FAL CLAIMS CFR 1.16(i))		minus 20 =		*		x \$ =		OR	x \$ =	
	EPENDENT CLAIM CFR 1.16(h))	S	minus 3 =				x \$ =		1	x \$ =	
	APPLICATION SIZE 37 CFR 1.16(s))	FEE shee is \$2 addi	ts of pape 50 (\$125 ional 50 s	pecification and drawings exceed 100 of paper, the application size fee due (\$125 for small entity) for each all 50 sheets or fraction thereof. See C. 41(a)(1)(G) and 37 CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))											
* If	he difference in coli	ımn 1 is less than	r "0" in column 2.		TOTAL			TOTAL			
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY CR SMALL ENTITY CLAMIS HIGHEST THICHEST THIC											
AMENDMENT	03/27/2008	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	• 11	Minus	·· 64	= 0	1	x \$ =		OR	X \$50=	0
	Independent (37 CFR 1,16(h))	• 2	Minus	···3	= 0	1	x \$ =		OR	X \$210=	0
	Application Size Fee (37 CFR 1.16(s))										
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					ı			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
		(Column 1)		(Column 2)	(Column 3)						
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())	*	Minus	**	=]	x \$ =		OR	x \$ =	
	Independent (37 CFR 1.16(h))		Minus	***	=		x \$ =		OR	x \$ =	
	Application Size Fee (37 CFR 1.16(s))					l	<u> </u>			Ь—	
ΑV	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
TOTAL ADDL FEE									OR	TOTAL ADD'L FEE	
*If the othry in column 1 is less than the entry in column 2, write 0° in column 3. Legal Instrument Examiner: *If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20". *If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3". *The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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